

**CALIFORNIA COMMISSION ON IMPROVING LIFE THROUGH SERVICE
AMERICORPS BID WORKSHEET FORM
FORM CC#130
REVISED 1/96**

AMERICORPS BID WORKSHEET

BUYER	DATE QUOTE RECEIVED	DATE QUOTE RECEIVED	DATE QUOTE RECEIVED
VENDOR NAME			
BUSINESS IDENTIFICATION	Circle One MBE / WBE / DVBE # _____ # _____	Circle One MBE / WBE / DVBE # _____ # _____	Circle One MBE / WBE / DVBE # _____ # _____
SMALL BUSINESS ENTERPRISE			
PERSON QUOTING			
TELEPHONE NUMBER			
F.O.B. - DESTINATION OR ORIGIN			
TERM			
DELIVERY			

[illegible]

